



Community Youth Organization Participation Report



Network for a Healthy California—Children's Power Play! Campaign DESERT SIERRA REGION

Thank you for being a champion for change for children! By returning this form, you'll help to ensure that the *Children's Power Play! Campaign* continues to receive funding to improve the health of California's children.

Contact Name/Title: _____
Organization Name: _____
Site Name: _____
Site Address: _____
City/Zip: _____ County: _____
Phone: _____ Fax: _____
E-mail: _____

of 9- to 11-year-old children participating in *Children's Power Play! Campaign* activities: _____

Kit Activity Name	Date(s) Completed
1. Power Bingo🍎	
2. How Much Do I Need? 🍎	
3. Warm Up for Power	
4. Power Tag	
5. Memory Ball	
6. Fruit & Vegetable Name Game🍎	
7. Rainbow Mysteries 🍎	
8. Grab the Flag	
9. Color Tag	
10. Memory Movement	

🍎 indicates nutrition education activities

Kit Activity Name	Date(s) Completed
11. Fixin' Fruits & Veggies🍎	
12. Grow Your Own 🍎	
13. Taste It! 🍎	
14. Advertising Power 🍎	
15. Movin' and Groovin'	
16. Powerful Art 🍎	
17. Field Trip Power 🍎	
18. Power Up Challenge	
19. Hoop Challenge	
20. Fitness Circuit Challenge	

If you would like to provide comments, please use the back of this form.

Did you use any other nutrition education resources?

<input type="checkbox"/> Harvest of the Month	<input type="checkbox"/> USDA's The Power of Choice	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Nutrition Decathlon	<input type="checkbox"/> Other USDA Team Nutrition resources	<input type="checkbox"/> Other: _____

Did you participate in any of the following?

(Please note location and date)

<input type="checkbox"/> Supermarket Tour
<input type="checkbox"/> Farmers' Market Tour

Return this form with at least TEN activities completed (seven must be nutrition education focused 🍎) and you'll be entered into a drawing for a smoothie party!

Note: Each activity counts once toward your incentive goal, even if it is conducted multiple times. However, please list all dates the activity was conducted for reporting purposes.

PLEASE RETURN PARTICIPATION REPORT TO:

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